

Evaluation / Certification

A post lecture questionnaire will provide the participant the opportunity to review each session and speaker and to identify future educational needs. All participants who sign in on the day of the lecture and complete an evaluation will receive a certification of credit.

Disclosure of faculty and sponsor relationships

In accordance with the Standards of the Accreditation Council For Continuing Medical Education (ACCME), it is the policy of St. Vincent Hospital and the Massachusetts Medical Society to disclose whatever interest or affiliation a speaker might have with any commercial organization whose products or services are related to the subject matter being presented. Such disclosure will be made available on the day of the lecture.

Continuing Education Credit

The Worcester MMRS Clinical Lecture Series has been approved for continuing education credits for Physicians, Nurses and Emergency Medical Technicians at all levels. The programs are also approved under the Massachusetts Medical Board of Registration in Medicine's criteria for risk management study. Saint Vincent Hospital designates this educational activity³ for a maximum of 1.5 hours in Category 1 credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

Saint Vincent Hospital is accredited by the Massachusetts Medical Society to sponsor continuing medical education for physicians.

The Metropolitan Medical Response System

The Worcester MMRS is based with the Worcester Department of Public Health. The MMRS is a contract program between the City of Worcester and the Department of Homeland Security. The purpose of the program is to develop consequence management plans for incidents involving weapons of mass destruction. The MMRS office also develops and sponsors educational and training initiatives for clinical professionals in both the pre-hospital and hospital health care settings. For more information on the program please contact:

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1. Army War College. Memorandum on Gas Poisoning in Warfare, With notes on its Pathology and Treatment. Washington, DC: Government Printing Office; 1917:5.
2. Brigadier General Russ Zajtchuk, Medical Corps, U.S. Army
3. 1.5 hours for each lecture in the series attended



Weapons of Mass Destruction Preparedness Clinics and Practitioners Lecture Series



**Sponsored by the Worcester Department of Public Health
Metropolitan Medical Response System.**

In cooperation with The Family Health Center of Worcester, Great Brook Valley Health Center, and the Massachusetts League of Community Health Centers.

The events of September 11, 2001 changed the world as we know it. Acts of transnational terrorism were carried out against the United States. Even as recovery operations continued in New York and Washington, five or more envelopes containing *Bacillus anthracis* spores were being sent via the US Postal Service. In retrospect, it seems as though the specter of domestic terrorism was again emerging from the shadows.


"Until recently, we in the United States have not given much thought to the specter of chemical and biological warfare. Our fathers and grandfathers who fought in World War I are almost all gone now, and the poet's image of gasses soldiers fumbling for their helmets has been considered merely a historical footnote—if it is remembered at all. But forgetting is a luxury we can no longer afford. In 1917, the Army War College stated:

The employment of poisonous gases as a means of offensive warfare has made it imperative that medical officers should have some knowledge of the action of various gases that are likely to be met with and of the rational lines of treatment which may be adopted in cases of gas poisoning

Nothing has changed except the increased availability of chemical and biological weapons; now more than ever we must be able to defend against attack and manage chemical and biological casualties."²

There is a misconception that terror attacks in the United States are a new and emerging threat. In fact terrorist use of chemical, biological, and conventional weapons in the United States has been attempted many times over the last thirty years, with various degrees of success. The 1970s saw The Weather Underground's and R.I.S.E.'s attempts at Biological terror, and the Alphabet Bomber succeed with conventional and chemical weapons. In 1980 the Rajneeshees used *Salmonella enterica* to sicken more than 750 people; and the CSA attempted to poison an urban water supply with 30 gallons of potassium cyanide in 1985. The 90s saw members of The Minnesota Patriots Council convicted under the Biological Weapons Anti Terrorism Act, the '93 World Trade Center Bombing, and the twisted eccentricities of Larry Wayne Harris.

It appears the question we must ask has changed from the hypothetical "If" to the surreal "with what, and when". This requires a new philosophy, a general acceptance of the threat, and a willingness to combat it on the streets and in the hospitals. This philosophy requires a new level of preparedness, awareness, knowledge and skills. The Worcester Department of Public Health Metropolitan Medical Response System Program presents this Clinics and Practitioners lecture series as part of its educational initiatives supporting hospital preparedness in Central Massachusetts.



*"The only thing
necessary for the
triumph of evil
is for good men
to do nothing"
-Edmund Burke*

Wednesday September 15, 2004. 0830-1000

Great Brook Valley Health Center

Bela Metyas MD

Medical Director, Division of Epidemiology and Immunization for the
Massachusetts Department of Public Health

Identifying Disease Caused by Biological WMD Agents

Wednesday October 20, 2004. 0830-1000

Family Health Center of Worcester

Lt. James Devlin

Massachusetts State Police Emergency Management Division

Responding to Bomb Threats

Wednesday November 17, 2004. 0830-1000

Great Brook Valley Health Center

Patricia Klute RN, MPH

Division of Epidemiology and Immunization for the
Massachusetts Department of Public Health

Mail related White Powder Threats

Wednesday December 15, 2004. 0830-1000

Family Health Center of Worcester

John Madonna Ed.D

Clinical Psychologist and Author. Director of Chandler Street Associates

Difusing Tense Situations and Violence

Wednesday January 19, 2005. 0830-1000

Great Brook Valley Health Center

Marc Restuccia, MD

Medical Director for Worcester EMS / Lifeflight

Dealing with Infectious Patients, Isolation issues and Emergency Medical Services

Wednesday February 16, 2005. 0830-1000

Family Health Center of Worcester

David Ladd

Director, Division of Hazardous Materials Response, Massachusetts Department of Fire Services

Basic Decontamination issues, Chemical Spills, and the 911 approach.

Wednesday March 16, 2005. 0830-1000

Great Brook Valley Health Center

TBA

Risk Communication